

BALCH (G. B.)

CANCER
OF THE
BLADDER AND PROSTATE.

BY G. B. BALCH, M.D.,

Of Yonkers, New York.

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CANCER OF THE BLADDER AND PROSTATE.

P. De F., aged fifty-seven years, was for many years an excessive user of alcoholic liquors. In June, 1875, he first began to have some pains above the pubis, with frequent desire to urinate, the stream being small; the pain was dull and heavy, but after urinating was quite severe.

Sudden desire to urinate, with dribbling, has occurred since May, 1876. The desire was so severe and sudden at times that it was impossible for him to find a place of seclusion. On the 20th day of September, with urgent call to urinate, blood spurted from the meatus urinaris, and, apparently, without being mixed with urine, very little pain accompanying the hemorrhage. After this, bloody urine continued to be passed and dribbled from him. When in a recumbent posture, the dribbling was constant; when in an erect or sitting posture, he could retain it and pass it naturally.

On the 5th day of October, 1876, I was first called to see him; he had just had a severe hemorrhage. I found him pale and weak, with an anxious expression of countenance. An examination revealed an enlarged prostate that was exceedingly tender. On attempting to catheterize him he complained of the instrument hurting him so very much that I desisted, there being no urgent symptom that called for it. In the use of this instrument there was no force used, and not one drop of blood was drawn, and it could not have passed further than to the prostatic portion of the urethra.

There was no interruption of the stream in urinating; no pain in the head of the penis, or pricking sensation in any

part of the urethra; no priapism; no enlargement of the penis or elongation of the prepuce, or prolapse of the anus. After a thorough examination, my opinion was given that there was a malignant condition existing at the neck of the bladder. About the first of November he ceased to have blood in his urine. The urine continued to dribble, and he passed none naturally. He lost his appetite at the time of the first hemorrhage, and never regained it; he continued to emaciate and lose strength.

November 15th he began to have bleeding from the mouth and nose, which continued to the end. On the 25th of November purpuric spots were noticed upon the lower extremities. He died on the fourth day of December, 1876. The treatment was iron and quinine, moderate stimulants, and carbonic water and milk for drink and nourishment.

His grandfather, on the maternal side, had osteo-sarcoma of the lower jaw. Autopsy six hours after death. The abdomen and lower extremities were covered with purpuric spots, the body was very much emaciated. The bladder contained about 8 oz. of clear, healthy urine. The peritoneum was quite adherent to the bladder, except a small part of the fundus. In that part connected to the bladder there were many small tumors about the size of a pea, and many of the same tumors could be seen in the walls of the bladder.

On opening the bladder its posterior and lateral walls were found very much thickened and infiltrated with these small growths. The prostate gland was very much enlarged and filled with this material. The mucous lining, particularly of the neck and lateral portions, was thickly studded with small tumors, from the size of a small Brazil nut to that of a small pea. The larger ones were located near the orifice of the urethra, and looked very much like organized blood clots; the others shaded off to almost white in the smaller ones. The ureters were enlarged, and were somewhat obstructed by these tumors where they entered the bladder. The kid-

neys were slightly fatty, and in the left was a dark hemorrhagic spot. The liver was slightly enlarged, but quite healthy in appearance. The rectum and other bowels were healthy. The thoracic cavity was not examined for want of time.

A microscopic examination has been made, and demonstrated the morbid condition to be encephaloid sarcoma.

